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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/750,162
Filing Date	12/30/2003
First Named Inventor	Martin Buehler
Art Unit	1795
Examiner Name	Noguerola, Alexander
Attorney Docket Number	CIT001

Total Number of Pages in This Submission

**ENCLOSURES (Check all that apply)**

- |                                                                              |                                                                                         |                                                                                         |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Drawing(s)                                                     | <input type="checkbox"/> After Allowance communication to Technology Center (TC)        |
| <input type="checkbox"/> Fee Attached                                        | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition                                                       | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                         | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information                                        |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter                                                  |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer                                            | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund                                             |                                                                                         |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s) _____                                      |                                                                                         |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <b>Remarks</b>                                                                          |                                                                                         |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    |                                                                                         |                                                                                         |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |                                                                                         |                                                                                         |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	CARY TOPE-MCKAY
Signature	
Date	01/09/2009

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

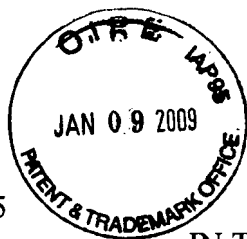
Typed or printed name	CARY TOPE-MCKAY
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Date 01/06/2009

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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5 IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/750,162 Confirmation No. : 5031  
Applicant : Martin Buehler TC/Art Unit : 1795  
10 Filed : 12/30/03  
Examiner : Noguerola, Alex  
Docket No. : CIT001  
Customer No. : 28848

15 Mail Stop: **AMENDMENT**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

20 TO THE COMMISSIONER FOR PATENTS

In reply to the Office Action dated October 6, 2008, for which the response period extends to and includes January 6, 2009, the Applicant respectfully requests the entry and consideration of the following amendments and/or remarks to the above-captioned  
25 application.

**Listing of the Claims** begins on page 2 of this document.

**Remarks/Arguments** begin on page 20 of this document.